Division of Corporations Electronic Filing Cover Sheet

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(((H180003633543)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone : (323)9€2-8600

Fax Number

: (323)962-3889

\*\*Enter the email address for this business entity to be used for fi annual report mailings. Enter only one email address please 🤼 🚉

Email Address:\_\_\_

 $(\cdot)$ 

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VEXIGO AVIATION LLC

Certificate of Status	θ
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

EXAMINER

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Help

## **COVER LETTER**

TO: Registration So Division of Co					
	AVIATION LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Cheyenne Moseley				
		Name of Person			
	Legalzoom.com, Inc.				
		Firm/Company			
	101 N. Brand Blvd., 116	h Floor			
		Address			
	Glendale, CA 91203				
		City/State and Zip Code		201	
	francis.s.fernandez@gma			<b>≘</b>	٠٠;
For further information of	eoncerning this matter, please or	to be used for future annual report notificat	ion)	2018 DEC 26	
Cheyenne Moseley		800 773-0888 ext. 5	9724	199 A	FF
Name o	f Person	Area Code Daytime To	lephone Number	C 26 AM 9: 18	
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	© \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cortified C	of Status &	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

VEXIGO AVIATION LLC		
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our restricted Liability Company)	ecords.)
The Articles of Organization for this Limited Liability C Florida document number L18000262008		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the words "Lis	mited Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		:22
(Mailing address MAY BE A POST OFFICE BOX)		<b>=</b>
		DE -
B. If amending the registered agent and/or regis	tered office address on our re	cords, enter the name of the new
registered agent and/or the new registered office add	ress here:	G A
		9 9
Name of New Registered Agent:		
New Registered Office Address:		<b>\~</b>
	Enter Florida street (	uldress
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registere		
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	amplete performance of my duti- gent as provided for in Chapter ed office address, I hereby confit	es, and I am familiar with and 605, F.S. Or, if this document is
	If Changing Registered Agent, Signs	sture of New Registered Agent

Page 1 of 3

MGR = Manager

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMDK - A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Francis S. Fernandez	16001 COLLINS AVE., APT. 702	<b>☑</b> Add
		SUNNY ISLES BEACH, FL 33160	☐ Remove
			D Add
			Remove
<del></del> -			□ Aċd
			□ Remove
	•		<b>2011</b> DEC 26
			6 A TO A T
			Add

	ange(s) here: (Attach additional sheets, if necessary.)
	·
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date the date this document is filed by the Florida Department of	of receipt or filed date and cannot be more than 90 days after
Dated <u>December</u> 12.	2018
Signutre of a mu	ember or authorized representative of a member
	Francis S. Fernandez
<del></del>	aned or printed name of Signer

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Filing Fee: \$25,00